PRELIMINARY INFORMATION - ANSWER <u>EACH</u> OF THESE QUESTIONS IPO AND EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER <u>EACH</u> OF THESE QUESTIONS **EXEMPTION** – Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or your dependent child because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics. TRUSTS – Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust that benefits you, your spouse, or dependent child? contact the Committee on Ethics for further guidance. IPO - Did you purchase any shares that were allocated as a part of an Initial Public Offering during the reporting period? If you answered "yes" to this question, please E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filling? D. Did you, your spouse, or your dependent child have any reportable liability (more than \$10,000) at any point during the reporting period? C. Did you or your spouse have "earned" income (e.g., salaries, honoraria, or pension/IRA distributions) of \$200 or more during the exchange any securities or reportable real estate in a transaction B. Did you, your spouse, or your dependent child purchase, sell, or A. Did you, your spouse, or your dependent child: Name: 2017 FINANCIAL DISCLOSURE STATEMENT UNITED STATES HOUSE OF REPRESENTATIVES exceeding \$1,000 during the reporting period? REPORT FILER STATUS b. Receive more than \$200 in unearned income from any reportable a. Own any reportable asset that was worth more than \$1,000 at the end of the reporting period? or asset during the reporting period? X 2017 Annual (Due: May 15, 2018) House of Representatives Member of the U.S. District: State: Yes Yes Yes Yes Yes No No. ス・ス・ファー ファント Daytime Telephone: ユュント Amendment Š ਫ਼ | | Z For Use by Members, Officers, and Employees G. Did you, your spouse, or your dependent child receive any reportable gift(s) totaling more than \$390 in value from a single source during the reporting period? F. Did you have any reportable agreement or arrangement with an outside entity during the reporting period or in the current calendar year up through the date of filing? ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES" Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article during the H. Did you, your spouse, or your dependent child receive any reportable travel or reimbursements for travel totaling more than \$390 in value from a single source during the reporting period? 1347 Employee Officer or Tree TS **Employing Office** Pruhuk Date of Termination Termination Ler A \$200 penalty shall be assessed against any individual who files more than 30 days late. EUINE RESOURCE OF incle by d DELIVERED JUL 26 AHII: IL てった Shared (Office Use Only) Staff Filer Type: (If Applicable) Yes Yes Ύes Yes Yes Yes Yes 12050 2 X Principal Assistant b Z 2 <u>Z</u> ۲ S O Page 1 of 25 몽 みし X X X own. 242

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20	#.	4	(A)	5	E		Exam		For a detailed discussion of Schedule A requirements please refer to the instruction booklet.	If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC), or jointly held with anyone (JT), in the optional column on the far left.	If you report a privately-traded fund that is an Excepted investment Fund, please check the "EIF" box.	Exclude: Your personal residence, including second homes and vecation homes (unless there was rental income during the reporting period); and early financial interest in, or income derived from, a federal retirement program, including the Thrift Savings Plan.	For an ownership interest in a privately-held business that is not publicly traded, state the name of the business, the nature of its activities, and its geographic location in Block A.	For rental and other real property held for investment, provide a complete address or description, e.g., "rental property," and a city and state.	For bank and other cash accounts, total the amount in all interest-bearing accounts. If the total is over \$5,000, list every financial institution where there is more than \$1,000 in interest-bearing accounts.	the account that exceeds the reporting thresholds.	For all IRAs and other retirement plans (such as	Provide complete names of stocks and mutual funds (do not use only ticker symbols).	that generated more than \$200 in "uneamed" income during the year.	Identify (a) each asset held for investment or production of income and with a fair market value exceeding \$1,000 at the end of the reporting period, and (1) any other reportable asset or source of income	Ass	
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□ \$183 RAYBURN HOUSE OFFICE BUILDING

WASHINGTON DC 20515—2206

720 Мым Sтяеет 720 Мын Sт. Joseph, IM, 49085 (269) 982-0237 FAX: (269) 982-0237 vog.9ous.house.gov

FAX: (269) 385-2888

(\$69) 385-0039 (\$69) 385-0039

350 E. Michigan Avenue Suite 130

MICHIGAN HOME OFFICES:

2183 HAYBURN HOUSE OFFICE BOILD
WASHINGTON, DC 20515–2206
(202) 225–3761
FAX: (202) 225–4986



FRED UPTON 6тн Dізтвіст, Міснівьи

COMMITTEE ON ENERCE

YBRBNA Chairmai

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DIGITAL COMMERCE AND CONSUMER PROTECTION

Congress of the United States Pouse of Representatives

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You will note a change from my past disclosure of the J.P. Morgan Trust holdings.

In consultation with my attorney and J.P. Morgan, they provided me this statement regarding the assets that the trusts hold: (this does not include the SEU Limited Partnership and Dynasty)

"With regard to the trusts above [4 that they manage], we spoke with Tim [our attorney] and have agreed that 1) Amey [my wife] has no interest in the trusts, and 2) because your current interest in three of the trusts is discretionary (and you have no current interest in the fourth trust), and your remaining interests are contingent upon your surviving your parents, you also have no ownership in the trusts."

I have always indicated that I have not had any control regarding the transactions of these trust accounts. They were established by my grandparents decades ago. I do receive distribution income from them which has always been reported, and as a result am now listing all of the assets exceeding \$1000 rether than in previous years at about \$5000.

I have gone back and listed stock transactions exceeding \$1000 in 2017 and 2018, and filed those on the Periodic Transaction Report today for the J.P. Morgan held trusts of which I hold no ownership.

I will continue to file transactions on the Periodic Transaction Report for stocks held in the remaining trusts.

Fred Upton

Member of Congress



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Use additional sheets if more space is required.

Name:

SCHEDULE C - EARNED INCOME

Name: Page_

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. government) totaling \$200 or more during the reporting period. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding \$1,000. See examples below.

INCOME LIMITS and PROHIBITED INCOME: The 2017 limit on outside earned income for Members and employees compensated at or above the "senior staff" rate was \$27,765. The 2018 limit is \$28,050. In addition, certain types of income (notably honoraria, director's fees, and payments for professional services involving a fiduciary relationship) are totally prohibited. EXCLUDE: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act.

							Westmister Presbytrien Church		Examples: State of Maryland	Source (include date of receipt for honoraria)
						,	Sporse Solary	Spouse Speech Spouse Salary	Approved Teaching Fee Legislative Pension	Туре
					5 S S S S S S S S S S S S S S S S S S S	•	NA	\$1,000 N/A	\$6,000 \$18,000	Amount

SCHEDULE D - LIABILITIES

Name: Land And Page 2 strong on your spouse, or your dependent child. Mark the highest amount owed during mortgages on their personal residence. Exclude: Any mortgage on your personal residence.

25

period. Members: Members are required to report all liabilities secured by real property including mortgages on their personal residence. Exclude: Any mortgage on your personal residence (unless you rent it out or are a Member); loans secured by automobiles, household furniture, or appliances; liabilities of a business in which you own an interest (unless you are personally liable); and liabilities owned to you by a spouse or the child, parent, or sibling of you or your spouse. Report a revolving charge account (i.e., credit card) only if the balance at the close of the reporting period exceeded \$10,000. *Column K is for liabilities held solely by your spouse or dependent child. Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or your dependent child. Mark the highest amount owed during the reporting

	P		7	77		SP, DC, JT		
	S. P. 1		5/2	J.P	Example			
	J.P. Mayor Chese	Renewall living Toust	Frehen E. Gabas	J.P. Morge Chose	First Bank of Wilmington, DE	Creditor		
	10/10	2/14	•	10/10	5/15	Date Liability Incurred MO/YR		
Padoff : 17	Home raje if -	Promisery Note	, canal	Home mortiese	Mortgage on Rental Property, Dover, DE	Type of Liability		
	×					\$10,001- \$15,000	>	
						\$15,001- \$50,000	DD	
						\$50,001- \$100,000	0	
				×	×	\$100,001- \$250,000	D	
		×				\$250,001- \$500,000	m	moun
						\$500,001- \$1,000,000	וד	Amount of Liability
						\$1,000,001- \$5,000,000	6	yilidg T
						\$5,000,001- \$25,000,000	Ι	
						\$25,000,001- \$50,000,000	-	
						Over \$50,000,000	C.	
					<u> </u>	Over \$1,000,000* (Spouse/DC Liability)	~	

SCHEDULE E - POSITIONS

Report all positions, compensated or uncompensated, held during the current or prior calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, nonprofit organization, labor organization, or educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities (such as political parties and campaign organizations); and positions solely of an honorary nature.

Position	Position Name of Organization
Dwner	Upton Asset Mil. Com. (Sak porture of SEG Lond. Parharshis)
Owner - / spout	SEU Low bed Per Marthy Chamile in restought complease
Truste "	SEU binibl Per boughing
Trishe	EVU, LLC (Family wishness company)
Temants wishes	Ups N Down, DU LLC
Board orienter	S.W. MI First

SCHEDULE F - AGREEMENTS

Name: 4 Page 1 Page 1 Page 2 P

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Identify the date, parties to, and general terms of any agreement or arrangement that you have with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. government; or continuing participation in an employee welfare or benefit plan maintained by a former

Date	Parties to Agreement	Terms of Agreement
	Nes	
	$\rho $	

SCHEDULE G -- GIFTS

Report the source (by name), a brief description, and the value of all gifts totaling more than \$390 received by you, your spouse, or your dependent child from any source during the year. **Exclude**: Gifts from relatives, gifts of personal hospitality from an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of \$156 or less need not be added towards the \$390 disclosure threshold. **Note**: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule and some gifts require prior approval of the Committee on Ethics.

Source	Description	Value
Exemple: Mr. Joseph Smith, Arlington, VA	Silver Platter (prior determination of personal friendship received from the Committee on Ethics)	\$400
.0.		
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1		

SCHEDULE H - TRAVEL PAYMENTS and REIMBURSEMENTS

Name:
anton
Page 25 of 25

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totaling more than \$390 received by you, your spouse, or your dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense. Disclosure is required regardless of whether the expenses were paid directly by the sponsor or were paid by you and reimbursed by the sponsor.

EXCLUDE: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (FGDA, 5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to the filer.

	Source	Date(s)	City of Departure-Destination-City of Return	Lodging? (Y/N)	Food? (Y/N)	Family Member Included? (Y/N)
	Government of China (MECEA)	Aug. 6-11	DC-Beijing, China-DC	Y	*	z
Examples	Habitat for Humanity (charity fundralser)	Mar. 3-4	DC-Boston-DC	· Y	Υ	٧
Ame	American Entropies Inst.	Mar 10-13	DC -> Son Island, CA -> DC	Y	Y	〈
	(2 dols at my own expense)			•	•	,
Asoc	Aspen Institut	Aug-15	GRR-> Oslo -> Anchuse	Y	y	×
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